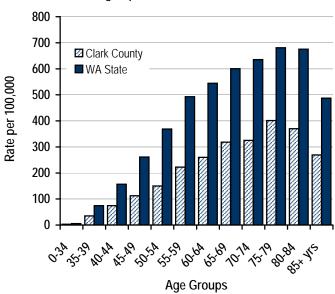


Female Breast Cancer Clark County and Washington State, 1994 through 2001

Why we should care:

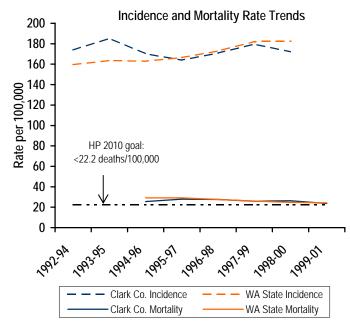
Breast cancer is the second leading cause of cancer death among Washington women. (1) If current rates stay constant, a baby girl born today has a one in eight chance of developing breast cancer over her lifetime. (1) Little is known about primary prevention and women are often not able to alter their personal risk factors. The best strategy to reduce breast cancer illness and death is early detection and treatment. (1)





What we can do:

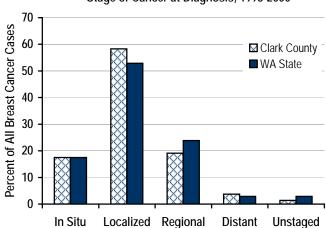
- Women who are overweight are at higher risk of post-menopausal breast cancer (6). Health policies that encourage women to maintain a healthy weight may reduce this risk.
- Support public education and outreach campaigns encouraging women to obtain regular breast cancer screening. Mammography is the best available method to detect breast cancer in its earliest, most treatable stage. (6,7) Women who have inadequate or no insurance are in particular need of assistance in accessing this screening.(1)
- Once women are diagnosed with breast cancer, access to effective treatment will require health policies that support full funding for comprehensive care and enhanced treatment services. (1)



Status:

- While Clark County's breast cancer incidence rate remained relatively stable, Washington State's rate rose slightly.(2)
- Breast cancer incidence rates increase with age, however, the rates are higher in each age group in the State compared to Clark County.(2)
- Breast cancer death rates in Clark County and the state were similar and remained stable between 1994-96 and 1999-01, but neither has met the Healthy People 2010 goal of fewer than 22.2 breast cancer deaths per 100,000 population (3, 4, 5).
- -In 1998-2000, over 75% of Clark County women diagnosed with breast cancer were identified during the early stages of the cancer; almost 20% were diagnosed when the cancer had already spread to adjacent parts of the body, thus lowering their chance of survival.(2)

Stage of Cancer at Diagnosis, 1998-2000





Female Breast Cancer Incidence and Mortality Clark County and Washington State, 1992-1994 through 1999-2001

Clark County				Washington State				
	Incidence			No. of	Incidence			No. of
Year	Rate*	No. of Cases	Death Rate	Deaths	Rate	No. of Cases	Death Rate	Deaths
1992-94	173.9	211	NMF**	-	159.6	4050	NMF**	-
1993-95	185.3	234	NMF**	-	163.5	4258	NMF**	-
1994-96	170.3	225	25.5	101	162.9	4340	29.1	2376
1995-97	163.9	228	27.9	116	166.5	4546	29.1	2426
1996-98	170.9	249	27.6	119	172.9	4837	27.6	2357
1997-99	179.7	272	25.8	116	182.2	5228	26.0	2286
1998-00	172.1	270	26.4	122	182.6	5360	24.8	2230
1999-01	NA***	NA***	23.6	114	NA***	NA***	24.2	2225

Technical notes

Rates:

- -Much of public health assessment involves describing the health status of a defined community by looking at changes in the community over time or by comparing health events in that community to events occurring in other communities or the state as a whole. In making these comparisons, we need to account for the fact that the number of health events depends in part on the number of people in the community. To account for growth in a community or to compare communities of different sizes, we usually develop rates to provide the number of events per population unit. The following rates are most commonly used:
- Crude mortality rates, or death rates, are calculated by dividing the number of deaths due to a certain cause by the population in which the deaths are occurring in a specified period of time such as one year.
- -Age-adjusted death rates are calculated to allow comparisons of death rates between two populations at the same time or the same population at different times. The age-adjustment process removes differences in the age composition of two or more populations to allow comparisons between these populations independent of their age structure.
- Incidence is a way of measuring the risk of a disease in a population. An incidence rate is calculated by dividing the number of new cases of a disease by the population in which the disease is occurring in a defined period of time (e.g. one year) and multiplying this number by 100,000.

Other technical notes:

- * Rate per 100,000 deaths adjusted using the 2000 U.S. Standard Population; deaths coded using ICD 10.
- **NMF = no meaningful figures. Deaths prior to 1994 cannot be accurately recoded using the ICD 10 system and therefore are not considered in these analyses
- -***NA = data not available at time of printing.

Sources

(1) Washington State Department of Health, The Health of Washington State. Female Breast Cancer. Olympia, WA, 2002, Aug [cited 2003 May 13] 418p. Available from http://www.doh.wa.gov/HWS. (2) Washington State Cancer Registry Data Online, Cancer Incidence Data, 1992-2000. Olympia, WA: Washington State Department of Health, Washington State Cancer Registry. Retrieved from http://www3.doh.wa.gov/WSCR/ASP/WSCRQry.asp in May 2003. (3) Vital Registration System, Annual Statistics Files, Deaths 1980-2001. [Data file]. Olympia, WA: Washington State Department of Health, Center for Health Statistics. (4) Public Health: Seattle & King County, Epidemiology, Planning, & Evaluation. (1991-2003). VistaPHw (Version 3.1.1) [Computer software for public health assessment]. Seattle, WA. (5) U.S. Department of Health and Human Services. Healthy People 2010 Objective 3-3: Reduce the breast cancer death rate to 22.2 deaths per 100,000 females. Washington, DC: January 2000. U.S. (6) Department of Health and Human Services. Healthy People 2010 Conference Edition-Volume 1, 3 Cancer; pp 3-12 - 3-13. Washington, DC: January 2000. (7) Centers for Disease Control and Prevention URL: http://www.cdc.gov/cancer; viewed April 22, 2003.